



2011 Physician Coding for Electromagnetic Navigation Bronchoscopy™ (ENB)


Patient Case Example: Bronchoscopy Biopsy with ENB

CPT Code ^{®1}	Description ¹	2011 Relative Value Unit (RVU) ²	2011 National Medicare Facility Physician Fee Schedule ²	2011 Estimated Medicare Payment
ENB Procedure (Planning and Navigation)				
+31627 ³	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with computer-assisted, image-guided navigation (List separately in addition to code for primary procedure[s])	3.02	\$103	\$103 ⁴

Bronchoscopy Procedures (Example Purposes Only*)				
31628	Bronchoscopy, rigid or flexible, including fluoroscopic guidance; with transbronchial lung biopsy	5.60	\$210	\$210 ⁵
31623	Bronchoscopy, rigid or flexible, including fluoroscopic guidance; with brushing or protected brushings	4.34	\$147	\$0 ⁵
Estimated Total Physician Payment				\$313

**Primary bronchoscopy procedures are billed in addition to 31627. Bronchoscopy codes used here are for example purposes only.*

1. Current Procedural Terminology (CPT) ® is copyright 2011 American Medical Association.
2. CMS update to CY2011 Physician Fee Schedule, December 29th, 2010. Medicare physician fee schedules are for physician office services and are national averages without geographically adjustment. Calculated with 2011 conversion factor of \$33.9764.
3. CPT code 31627 includes 3D rendering. Do not report 31627 in conjunction with 76376 and 76377. Use 31627 in conjunction with 31615, 31622-31631, 31635-31636 and 31638-31643. CPT Book 2011.
4. CPT code 31627 is designated as “add-on” procedure” and not subject to multiple procedure discount.
5. Subject to multiple endoscopy rule. Highest value procedure paid at 100%. Subsequent procedures are paid at allowable rate minus the base rate for 31622 (RVU in 2011 is 4.35 facility).



The information contained in this document is provided to help you understand the reimbursement process. It is not intended to increase or maximize reimbursement by any payer. We strongly recommend that providers consult their payer organization with regard to local reimbursement policies. The information contained in this document is provided for information and training purposes only and represents no statement, promise or guarantee by superDimension, Inc. concerning levels of reimbursement, payment or charge. Providers are encouraged to contact their local payers with questions regarding coverage, coding, or payment.

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